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	NVN2536ADA	A. BUILDING _____ B. WING _____	08/06/2009

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STEP 2, INC	3220 CORONADO WAY RENO, NV 89503

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D 000	Initial Comment The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws. This Statement of Deficiencies was generated as a result of the State Licensure survey conducted at your facility on 8/6/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for sixteen residential program beds for the treatment of abuse of alcohol and drugs. The census at the time of the survey was sixteen. Ten resident files and ten employee files were reviewed. One discharged resident file was reviewed.	D 000		
D 035 SS=F	NAC 449.098(3)) Preparations for disaster 3. Each facility shall conduct a disaster drill at least annually, and a written record of each drill must be retained in the facility for not less than 12 months after the drill is conducted. This Regulation is not met as evidenced by: Based on interviews on 8/6/09, the facility had not conducted an annual disaster drill. Findings include: Staff persons reported they were unaware they needed to conduct disaster drills annually. Severity: 2 Scope: 3	D 035		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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D 042	Continued From page 1	D 042		
D 042 SS=A	NAC 449.105 Insurance Liability insurance in a sufficient amount to protect clients, members of the staff, volunteers, and visitors, must be maintained. A certificate of insurance must be furnished to the health division. The certificate must include provision for 30 days notice to the division of cancellation or the nonrenewal of the policies. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the liability insurance certificate did not include a provision for a 30 day notice to the Bureau of cancellation or the non-renewal of the policies. Findings include: The liability insurance certificate did not specify that the Bureau be notified in the event of a cancellation or non-renewal of the policy within 30 days. Severity: 1 Scope: 1	D 042		
D 068 SS=A	NAC 449.111(2)(c) Administrator Duties 2. The administrator shall: (c) Appoint a person of majority age to act for him during any absence. This Regulation is not met as evidenced by: Based on record review and interview on 8/6/09, the administrator had not appointed a person to act for him during any absence. Findings include:	D 068		

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D 068	Continued From page 2 During a review of the facility records, the name of the person appointed to act in the administrator's absence was not located. The administrator reported that he had not designated anyone to act during his absences. Severity: 1 Scope: 1	D 068		
D 082 SS=C	NAC 449.114(8)(a) Employees 8. Written job descriptions must be maintained for all positions. A description must include: (a) The title of the job; The job description must accurately reflect the actual job situation and must be reviewed annually or whenever a change in the job or qualifications occurs. Job descriptions must be available on request to all members of the staff. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to maintain complete job descriptions in 4 of 10 employee files reviewed. (Employee #1, #2, #6 & #10) Severity: 1 Scope: 3	D 082		
D 090 SS=C	NAC 449.114(9)(b) Employees 9. A personnel record must be maintained for each employee. The record must contain: (b) Letters of recommendation This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility did	D 090		

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D 090	Continued From page 3 not obtain letters of recommendation for 8 of 10 employees (Employee #1, #2, #3, #4, #6, #7, #8, and #10). Severity: 1 Scope: 3	D 090		
D 091 SS=C	NAC 449.114(9)(c) Employees 9. A personnel record must be maintained for each employee. The record must contain: (c) Reference investigation records This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to conduct a reference investigation for 6 of 10 employees (Employee #1, #2, #6, #7, #8, and #10). Severity: 1 Scope: 3	D 091		
D 094 SS=C	NAC 449.114(9)(f) Employees 9. A personnel record must be maintained for each employee. The record must contain: (f) Job performance evaluations; This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility did not have documentation of a job performance evaluation for 4 of 7 employees employed at the facility for longer than a year (Employee #3, #4, #5, and #6). Severity: 1 Scope: 3	D 094		
D 100 SS=F	NAC 449.117 Physical Examinations All persons employed in a facility must have	D 100		

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D 100	Continued From page 4 documentation showing that they are in compliance with any applicable provisions of chapter 441A of NAC concerning tuberculosis. This Regulation is not met as evidenced by: NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment. (NRS 441A.120) 1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a: (a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and	D 100		

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D 100	Continued From page 5	D 100		

any other communicable disease in a contagious stage; and
(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.
If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.
4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.
5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.
6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.
7. A medical facility shall maintain surveillance of employees for the development of pulmonary

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D 100	Continued From page 6 symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. (Added to NAC by Bd. of Health, eff. 1-24-92; A by R084-06, 7-14-2006) Based on record review on 8/6/09, the facility did not ensure that 10 of 10 employees met the requirements of NAC 441A.375 concerning tuberculosis (TB). Findings include: Employee #1 - The employee file did not contain documentation of the required physical examination. Employee #2 - The employee file did not contain documentation of the required physical examination or both of the required two-step skin tests for tuberculosis (TB). Employee #3 - The employee file did not contain documentation of the required physical examination or the second step of the required two-step skin test for tuberculosis (TB). Employee #4 - The employee file did not contain documentation of the required physical examination or both of the required two-step skin testing for tuberculosis (TB). Employee #5 - The employee file did not contain documentation of the required physical	D 100		

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D 100	Continued From page 7 examination or the second step of the required two-step skin test for tuberculosis (TB). Employee #6 - The employee file did not contain documentation of the required physical examination. Employee #7 - The employee file did not contain documentation of the required physical examination or both of the required two-step skin tests for tuberculosis (TB). Employee #8 - The employee file did not contain documentation of the required physical examination. Employee #9 - The employee file did not contain documentation of the required physical examination. Employee #10 - The employee file did not contain documentation of the required physical examination. Severity: 2 Scope: 3	D 100		
D 160 SS=F	NAC 449.135(1) Safety from fire 1. Portable fire extinguishers must be installed throughout each facility at the direction of the fire authority having jurisdiction. Each portable fire extinguisher available at a facility must be inspected, recharged and tagged at least once each year by a person certified by the State Fire Marshal to conduct such inspections.	D 160		

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D 160	Continued From page 8 This Regulation is not met as evidenced by: Based on observation on 7/28/08, the facility failed to ensure that 7 of 7 fire extinguishers were annually inspected. Findings include: The fire extinguishers located in the main house and the lower house had expired service tags dated 8/8/07. Severity: 2 Scope: 3	D 160		
D 168 SS=E	NAC 449.135(6) Safety from fire 6. A facility must conduct fire drills at least monthly and a written record of each drill conducted must be retained in the facility for not less than 12 months after the drill is conducted. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to ensure that fire drills were conducted monthly during the past 5 of 12 months. Findings include: The fire drill log was reviewed. The log did not contain documentation the facility had conducted a fire drill during the months of 9/08, 12/08, 4/09, 5/09 and 6/09. Severity: 2 Scope: 2	D 168		
D 215 SS=F	NAC 449.141(7) Health Services 7. There must be one staff person in the facility who is capable of providing cardiopulmonary	D 215		

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D 215	Continued From page 9 resuscitation at all times. Staff members providing cardiopulmonary resuscitation must be qualified by the American Red Cross or another recognized agency. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility did not ensure that 7 of 10 employee files had evidence of cardiopulmonary resuscitation(CPR) (Employee #1, #2, #5, #7, #8, #9 and #10). Severity: 2 Scope: 3	D 215		
D 216 SS=F	NAC 449.141(8) Health Services 8. Clients of residential programs must undergo a tuberculin skin test that meets the requirements specified in chapter 441A of NAC. This Regulation is not met as evidenced by: NAC 441A.380 Admission of persons to certain medical facilities, facilities for the dependent or homes for individual residential care: Testing; respiratory isolation; medical treatment; counseling and preventive treatment; documentation. (NRS 441A.120). 1. Except as otherwise provided in this section, before admitting a person to a medical facility for extended care, skilled nursing or intermediate care, the staff of the facility shall ensure that a chest radiograph of the person has been taken within 30 days preceding admission to the facility. 2. Except as otherwise provided in this section, the staff of a facility for the dependent, a home for individual residential care or a medical facility for extended care, skilled nursing or intermediate care shall:	D 216		

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D 216	Continued From page 10 (a) Before admitting a person to the facility or home, determine if the person: (1) Has had a cough for more than 3 weeks; (2) Has a cough which is productive; (3) Has blood in his sputum; (4) Has a fever which is not associated with a cold, flu or other apparent illness; (5) Is experiencing night sweats; (6) Is experiencing unexplained weight loss; or (7) Has been in close contact with a person who has active tuberculosis. (b) Within 24 hours after a person, including a person with a history of bacillus Calmette-Guerin (BCG) vaccination, is admitted to the facility or home, ensure that the person has a tuberculosis screening test, unless there is not a person qualified to administer the test in the facility or home when the patient is admitted. If there is not a person qualified to administer the test in the facility or home when the person is admitted, the staff of the facility or home shall ensure that the test is performed within 24 hours after a qualified person arrives at the facility or home or within 5 days after the patient is admitted, whichever is sooner. (c) If the person has only completed the first step of a two-step Mantoux tuberculin skin test within the 12 months preceding admission, ensure that the person has a second two-step Mantoux tuberculin skin test or other single-step tuberculosis screening test. After a person has had an initial tuberculosis screening test, the facility or home shall ensure that the person has a single tuberculosis screening test annually thereafter, unless the medical director or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of	D 216		

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D 216	Continued From page 11 examination must be determined by following the guidelines as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 3. A person with a documented history of a positive tuberculosis screening test is exempt from skin testing and routine annual chest radiographs, but the staff of the facility or home shall ensure that the person is evaluated at least annually for the presence or absence of symptoms of tuberculosis. 4. If the staff of the facility or home determines that a person has had a cough for more than 3 weeks and that he has one or more of the other symptoms described in paragraph (a) of subsection 2, the person may be admitted to the facility or home if the staff keeps the person in respiratory isolation in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200 until a health care provider determines whether the person has active tuberculosis. If the staff is not able to keep the person in respiratory isolation, the staff shall not admit the person until a health care provider determines that the person does not have active tuberculosis. 5. If a test or evaluation indicates that a person has suspected or active tuberculosis, the staff of the facility or home shall not admit the person to the facility or home or, if he has already been admitted, shall not allow the person to remain in the facility or home, unless the facility or home keeps the person in respiratory isolation. The person must be kept in respiratory isolation until a health care provider determines that the person does not have active tuberculosis or certifies that, although the person has active tuberculosis, he is no longer infectious. A health care provider shall not certify that a person with active tuberculosis is not infectious unless the health care provider has	D 216		

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D 216	Continued From page 12 obtained not less than three consecutive negative sputum AFB smears which were collected on separate days. 6. If a test indicates that a person who has been or will be admitted to a facility or home has active tuberculosis, the staff of the facility or home shall ensure that the person is treated for the disease in accordance with the recommendations of the Centers for Disease Control and Prevention for the counseling of, and effective treatment for, a person having active tuberculosis. The recommendations are set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200. The staff of the facility or home shall ensure that counseling and preventive treatment are offered to each person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 8. The staff of the facility or home shall ensure that any action carried out pursuant to this section and the results thereof are documented in the person ' s medical record. (Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96; R084-06, 7-14-2006) Based on record review on 8/6/09, the facility did not ensure that 4 of 9 residents met the requirements of NAC 441A.380 concerning tuberculosis (TB). Findings include: Resident #4 - The resident's file did not contain evidence of any TB skin testing. Resident #6 - The resident's file did not contain evidence of any TB skin testing. Resident #7 - The resident's file did not contain	D 216		

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D 216	Continued From page 13 evidence of any TB skin testing. Resident #8 - The resident's file did not contain evidence of any TB skin testing. Severity: 2 Scope: 3	D 216		
D 217 SS=F	NAC 449.141(9) Health Services 9. Each facility shall maintain and have readily available first-aid supplies. Staff members shall have evidence that they have received training on the use of first-aid supplies. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility did not ensure that 7 of 10 employee files had evidence of first aid training (Employee #1, #2, #5, #7, #8, #9 and #10). Severity: 2 Scope: 3	D 217		
D 250 SS=F	NAC 449.147(6)(a-d) Dietary Services 6. A facility with more than 10 clients must: (a) Comply with all applicable provisions of chapter 446 of NRS and the regulations adopted pursuant thereto; (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Health Division; (c) Maintain a report of each inspection concerning the sanitation of the facility for at least 1 year after the date of the inspection; and (d) Maintain a report of each corrective action taken to address a deficiency noted in a report described in paragraph (c) for at least 1 year after the date of the corrective action.	D 250		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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D 250	Continued From page 14 This Regulation is not met as evidenced by: Based on observation on 8/6/09, the facility failed to comply with the provisions of chapter 446 of the Nevada Revised Statutes (NRS). Findings include: The food preparation and food storage areas were inspected. The following deficiencies were identified: - A kitchen cabinet was missing a drawer. - A wooden knife block (non-cleanable and non-sanitary) was used to store knives. - Badly dented and swollen cans being stored in the dry storage area (four cans of pears and one can of vegetable soup). - Opened package of pasta and cases of peanut butter laying directly on the floor in the dry storage room. - Raw eggs stored above and next to raw produce. - Clients in the kitchen preparing food without being supervised by an employee trained in Safe Serve. - Clients not washing their hands prior to preparing food. - No hand soap at the handsink and paper towels were not located near handsink in the dispenser. - Badly worn cutting boards. - Non-commercial NSF grade appliances observed in use (refrigerator/freezer - 3, freezer - 2, toaster, microwave, hand mixer, toaster oven and stove).	D 250		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVN2536ADA	A. BUILDING _____ B. WING _____	08/06/2009

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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D 250	Continued From page 15 - Dirty interiors of refrigerators including produce drawers. - Thermometers missing in refrigerators and freezers. - Light bulb in dry storage burnt out. - Dishwasher being stopped mid-cycle by clients to remove silverware. - No chemicals (detergent or sanitizer) being used in dishwasher. - No sanitizer strips for the monitoring of bleach water. Severity: 2 Scope: 3	D 250		
D 253 SS=C	NAC 449.147(9) Dietary Services 9. A qualified person must be used as a consultant on planning meals and serving food. Consultation each month is required. A qualified person may be a person meeting the requirements for registration with the Commission on Dietetic Registration as either a registered dietitian or a registered dietetic technician. This Regulation is not met as evidenced by: Based on interviews on 8/6/09, the facility did not provide evidence their dietician was qualified to plan meals and consult on the serving of food. Findings include: The facility did not have a current license for their consulting dietician. Severity: 1 Scope: 3	D 253		

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DK999	Continued From page 16	DK999		
DK999 SS=F	Final Comments This Regulation is not met as evidenced by: NRS 652.060 " Medical laboratory " defined. " Medical laboratory " means any facility for microbiological, serological, immunohematological (blood banking), cytological, histological, chemical, hematological, biophysical, toxicological, or other methods of examination of tissues, secretions or excretions of the human body. The term does not include a forensic laboratory operated by a law enforcement agency. NRS 652.080 License required; term; renewal; inactive status; licensure of laboratory located outside state. 1. Except as otherwise provided in NRS 652.217 and NRS 652.235, no person may operate, conduct, issue a report from or maintain a medical laboratory without first obtaining a license to do so issued by the Health Division pursuant to the provisions of this chapter. 2. A license issued pursuant to the provisions of subsection 1 is valid for 24 months and is renewable biennially on or before the date of its expiration. 3. No license may be issued to a laboratory which does not have a laboratory director. 4. A license may be placed in an inactive status upon the approval of the Health Division and the payment of current fees. 5. The Health Division may require a laboratory that is located outside of this state to be licensed in accordance with the provisions of this chapter before the laboratory may examine any specimens collected within this state if the Health Division determines that the licensure is necessary to protect the public health, safety and	DK999		

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DK999	Continued From page 17 welfare of the residents of this state. Based on interviews on 8/6/09, the facility did not have a State license to conduct urinalysis screening on 16 of 16 clients. Findings include: A staff person reported facility staff use urine dip tests to test client urine for the presence of controlled substances every two weeks. A staff person reported the facility was in the process of obtaining a State license to conduct urinalysis screening. A Bureau employee confirmed that the facility had applied for a license, but it had not been issued yet. Severity: 2 Scope: 3	DK999		